



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2024
Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

APR 23 2024 STAMP
4488

1. Entity ID Number 000796361		2. Exact name of the Corporation The Farmhouse Preschool, Inc.			
3. Principal Office Address 1140 Reservoir Avenue			City Cranston	State RI	Zip 02920
4. NAICS Code 624410		6. Brief description of the character of business conducted in Rhode Island Operation of a preschool			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Kristin J. Calitri			Vice-President Name Allison J. Costabile		
Street Address 281 Longmeadow Avenue			Street Address 94 Pheasant Drive		
City Warwick	State RI	Zip 02889	City Cranston	State RI	Zip 02920
Secretary Name Allison J. Costabile			Treasurer Name Kristin J. Calitri		
Street Address 94 Pheasant Drive			Street Address 281 Longmeadow Avenue		
City Cranston	State RI	Zip 02920	City Warwick	State RI	Zip 02889
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Kristin J. Calitri			Director Name Allison J. Costabile		
Street Address 281 Longmeadow Avenue			Street Address 94 Pheasant Drive		
City Warwick	State RI	Zip 02889	City Cranston	State RI	Zip 02920
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		
			600	STK	\$0.0100
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
Name of Authorized Representative Kristin J. Calitri					Date 4/8/24
Signature of Authorized Representative 					